

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/584740

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
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41						
42						
43						
44						
45	1					
46		1				
47						
48						
49						
50						
TOTAL IND.			↓		↓	↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS		████████		████████		████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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74						
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77						
78	1					
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92	1					
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.	←		←		←	
TOTAL CLAIMS		████████		████████		████████

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/584740	FILING DATE						
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101							151						
102							152						
103							153						
104							154						
105							155						
106							156						
107							157						
108	1						158						
109		1					159						
110			1				160						
111				1			161						
112					1		162						
113						1	163						
114	1						164						
115		1					165						
116			1				166						
117				1			167						
118					1		168						
119						1	169						
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147							197						
148							198						
149							199						
150							200						
TOTAL IND.	7						TOTAL IND.						
TOTAL DEP.	108	←			←	←	TOTAL DEP.						
TOTAL CLAIMS	115						TOTAL CLAIMS						